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Facsimile Cover Sheet

To: Hon. Commissioner for Patents, TC2100**From:** Craig S. Fischer

ATTN: Examiner KYLE R. STORK

Fax: (571) 273-8300**Pages:** 22 (inclusive)**Re:** Serial No.: 09/681,771**Date:** December 15, 2005

Filed: June 2, 2001

Attorney Docket No: MCS-004-01

☐ **Urgent**☒ **For Review**☐ **Please Comment**☒ **Please Reply****CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8**

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on December 15, 2005

Date

Signature


Craig S. Fischer

Typed or printed name of person signing Certificate

This correspondence includes the following attached papers:

1. Facsimile Cover Sheet including Certificate of Transmission under 37 C.F.R. § 1.8 (1 page);
2. Amendment Transmittal Letter (1 page);
3. Amendment under 37 C.F.R. § 1.116 (19 pages);
4. Applicant-Initiated Interview Request Form (1 page).

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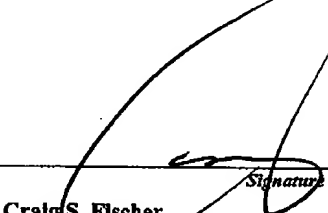
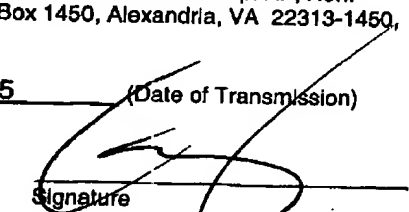
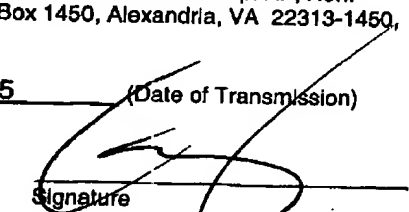
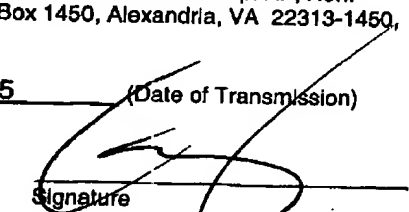
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PAGE 02

DEC 15 2005

TRANSMITTAL LETTER (Large Entity)				Docket No. MCS-004-01									
Applicant(s): BRILL et al.													
Serial No. 09/681,771	Filing Date June 2, 2001	Examiner Kyle R. Stork	Group Art Unit 2178										
Invention: SPELLING CORRECTION SYSTEM AND METHOD FOR PHRASAL STRINGS USING DICTIONARY LOOPING													
<u>TO THE HON. COMMISSIONER FOR PATENTS:</u>													
Transmitted herewith is an response to a Restriction Requirement in the above-identified application. The fee has been calculated and is transmltted as shown below.													
CLAIMS AS AMENDED													
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE								
TOTAL CLAIMS	24 -	26 =	0 x	\$50.00	\$0.00								
INDEP. CLAIMS	5 -	5 =	0 x	\$200.00	\$0.00								
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00								
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00								
<input checked="" type="checkbox"/> No additional fee is required. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> A Credit Card Payment Form (PTO-2038) for payment in the amount of _____ is enclosed.													
 _____ Craig S. Fischer Registration No. 42,535 LYON & HARR, L.L.P. 300 East Esplanade Drive Suite 800 Oxnard, CA 93036-1274 TEL: (805) 278-8855 FAX: (805) 278-8064			Dated: December 15, 2005 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8</td> </tr> <tr> <td colspan="2">I hereby certify that this paper and every paper referred to therein as being enclosed is being facsimile transmitted to Mail Stop: AF, Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, TC2100 at (571) 273-8300</td> </tr> <tr> <td>on <u>December 15, 2005</u></td> <td style="text-align: right;">(Date of Transmission)</td> </tr> <tr> <td>By <u>Craig S. Fischer</u></td> <td style="text-align: right;">  _____ Signature </td> </tr> </table>			CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. § 1.8		I hereby certify that this paper and every paper referred to therein as being enclosed is being facsimile transmitted to Mail Stop: AF, Hon. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, TC2100 at (571) 273-8300		on <u>December 15, 2005</u>	(Date of Transmission)	By <u>Craig S. Fischer</u>	 _____ Signature
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on <u>December 15, 2005</u>	(Date of Transmission)												
By <u>Craig S. Fischer</u>	 _____ Signature												

P11LARGE/REV08

PTOL-413A (08-03)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Applicant Initiated Interview Request Form

Application No.: 09 / 681,771 First Named Applicant: BRILL et al.
Examiner: KYLE R. STORK Art Unit: 2178 Status of Application: Pending

Tentative Participants:

(1) Examiner Kyle R. Stork (2) Craig Fischer
(3) _____ (4) _____

Proposed Date of Interview: Jan. 9, 2006 Proposed Time: 1 PM (EDT)

Type of Interview Requested:

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☒ NO

If yes, provide brief description: _____

Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>103(a) Rejections</u>	<u>Claims 1, 11, 18, 24, & 25</u>	<u>Brill et al., Birman et al., & Califano et al.</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

Brief Description of Arguments to be Presented: (Please see attached 116 amendment).

An interview was conducted on the above-identified application on _____.

NOTE:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

(Applicant/Applicant's Representative Signature)

Craig S. Fischer Reg. No. 42,535

(Examiner/SPE Signature)

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.